

Cornerstone Christian Academy

**Fee Payment Agreement**

Parent's name(s) \_\_\_\_\_

**Fee Schedule**

pre-K through 5<sup>th</sup> grades.....\$2000 per year  
6<sup>th</sup> - 12<sup>th</sup> grades.....\$2250 per year

**Discounts:**

1. A \$25 monthly discount will be given to the second, \$50 for the third, \$75 for the fourth child of the same family.
2. A 5% discount of the total tuition if paid in full at the beginning of the school year.

**Terms of Payment:** All payments are due by the 10<sup>th</sup> of each month, unless prior arrangements are made.

Option 1 - Families may elect to pay monthly for 10 months, beginning the first month of school.  
\$200 or \$225 for 10 months

Option 2 - Families may elect to pay monthly for 12 months, beginning the first month of school.  
\$166.67 or \$187.50 for 12 months

Option 3 - Families may elect to pay their entire tuition charges at one time and receive a 5% discount.  
\$1900 or \$2137.50

1. A \$30 charge will be assessed for NSF payments (returned checks).
2. New students will be charged, and shall pay at the time of enrollment, for the entire month in which they are enrolled and then monthly thereafter.
3. Any families with delinquent accounts may be subject to suspension, until a payment is made.
4. The first tuition payment is due the first week of school.

List Children's names from oldest to youngest:

Oldest child's name _____	Tuition Fee: _____
Next oldest child's name _____	Tuition Fee less \$25 _____
Next oldest child's name _____	Tuition Fee less \$50 _____
Youngest child's name _____	Tuition Fee less \$75 _____
Please circle your choice of Payment Term ~ Option 1    Option 2    Option 3	Total _____

**Financial Assistance**

Assistance is available for up to ½ price for qualifying families. Please complete the following questions for the Board to review. All information will remain confidential to the Board. Aid will be awarded based on genuine need and availability of funds.

All monthly combined household income \_\_\_\_\_ All monthly combined household expenses \_\_\_\_\_

Number of Dependents \_\_\_\_\_ How much can you pay monthly? \_\_\_\_\_

Do you have someone that could possibly sponsor your child? (Name & #) \_\_\_\_\_

**Fund raisers**

There will be several fund raisers throughout the school year. This money is necessary to meet our financial obligations. If you choose not to participate, a personal donation of \$20 is required.

I understand that my fee is based on enrollment and that I am responsible for paying even if my child is absent or if school is cancelled. I also understand the above statements and agree to comply with the fee policies and terms, including fund raisers. I realize that failure to adhere to the payment schedule and/or policies can result in termination of school services.

Parent Signature \_\_\_\_\_ date \_\_\_\_\_

Parent Signature \_\_\_\_\_ date \_\_\_\_\_